

## BUDGET APPROPRIATION INCREASE REQUEST

Auditor Number     B-18    

DEPARTMENT NAME     2072 - Coroner    

Date:     December 2, 2024    

I am requesting an increase or decrease to my budget appropriations as listed below:

**Check one**  "Previous Year Revenue"  "New Revenue"

Funding Source     Local Assistance and Tribal Consistency Fund (LATCF)    

**\*\*\*Note**     **General Fund and Public Safety "MUST" use Contingency when increasing budget**

Increase Revenue Budget				Increase Expenditure Budget			
FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT	FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
2072	4507205	LATCF	\$ 31,387.03	2002	59000	Contingency	\$ 31,387.03
1109	59000	Contingency	\$ 31,387.03	2072	57608	Special Department Equip.	\$ 31,387.03
Total Journal			\$ 62,774.06	Total Journal			\$ 62,774.06

INCREASE / (DECREASE) APPROVED

     12/2/24      
SIGNATURE OF REQUESTING OFFICIAL     DATE

    Ana Zamacona             12/04/2024      
AUDITOR     DATE

\_\_\_\_\_  
BOARD OF SUPERVISORS     DATE